

STANDING CHAPTER 13 TRUSTEE ALEJANDRO OLIVERAS RIVERA  
REPORT OF ACTION TAKEN  
MEETING OF CREDITORS

In re:

CARLOS ROBERTO NEGRON PADILLA

Case No. 10-02033-BKT

Chapter 13

Attorney Name: JUAN O CALDERON LITHGOW\*

**I. Appearances**

Debtor ☐ Present ☐ Absent  
Joint Debtor ☐ Present ☐ Absent  
Attorney for Debtor ☐ Present ☐ Absent  
☐ Pro-se  
☐ Substitute \_\_\_\_\_

Date: April 30, 2010

Time: 10:30am Track: 8  
☐ This is debtor(s) 2 Bankruptcy filing.

Liquidation Value: 71310

Creditors

Huacena

John Mouja Mora

BPPN- LG Buase

**II. Oath Administered**

☐ Yes ☐ No

**III. Documents Filed/Provided**

<input checked="" type="checkbox"/> Schedules	<input checked="" type="checkbox"/> DSO Recipient's information
<input checked="" type="checkbox"/> Statement of Financial Affairs (SOFA)	<input type="checkbox"/> State Tax Returns _____ <input type="checkbox"/> Returned
<input checked="" type="checkbox"/> Statement of Current Monthly Income (SCMI)	<input type="checkbox"/> Federal Tax Returns _____ <input type="checkbox"/> Returned
<input type="checkbox"/> Credit counseling briefing certificate (CCC)	<input type="checkbox"/> Evidence of income (60 days prior to petition)
<input type="checkbox"/> Waiver requested by debtor(s)	
<input type="checkbox"/> DSO Certificate	

IV. Status of Meeting ☐ Closed ☐ Not Held ☒ Continued May 27 10 at 8am

**V. Trustee's Report on Confirmation**

☐ FAVORABLE  
☐ UNFAVORABLE

<input type="checkbox"/> Feasibility	<input type="checkbox"/> No DSO certificate (Post-petition)
<input type="checkbox"/> Insufficiently funded	<input type="checkbox"/> Evidence of income
<input type="checkbox"/> Unfair discrimination	<input type="checkbox"/> Missing <input type="checkbox"/> Incomplete
<input type="checkbox"/> Fails liquidation value test	<input type="checkbox"/> Stmt. of Current Monthly Income
<input type="checkbox"/> Fails disposable income test (I & J)	<input type="checkbox"/> Incomplete <input type="checkbox"/> Missing
<input type="checkbox"/> No provision for secured creditor(s)	<input type="checkbox"/> Fails commitment period <input type="checkbox"/> Fails Disp. Income
_____	<input type="checkbox"/> Certificate of Credit briefing
_____	<input type="checkbox"/> Missing <input type="checkbox"/> More than 180 days
<input type="checkbox"/> Treat value of collateral separately	<input type="checkbox"/> Issuer not certified by U.S.T.
<input type="checkbox"/> No provision for insurance	<input type="checkbox"/> Incomplete schedules
<input type="checkbox"/> Tax returns missing	<input type="checkbox"/> Incomplete S.O.F.A.
<input type="checkbox"/> State - years _____	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Federal - years _____	

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VI. Plan

(Cont.)

Date: \_\_\_\_\_ Base \$ 0.00 ☐ Filed Evidence of Pmt shown: \_\_\_\_\_  
Payments 0 made out of \_\_\_\_\_ due. ☒ Not Filed

VII. Confirmation Hearing Date: May, 14, 2010

VIII. Attorney's fees as per R. 2016(b)

\$3,000.00 - \$ 0.00 = \$ 3,000.00

IX. Documents to be provided w/in \_\_\_\_\_ days

☐ Amended schedules \_\_\_\_\_

☐ Amended S.O.F.A. \_\_\_\_\_

☐ Insurance estimate \_\_\_\_\_

☐ Amended plan \_\_\_\_\_

☐ Assumption/Rejection executory contract \_\_\_\_\_

☐ Business Documents \_\_\_\_\_

☐ Monthly reports for the months \_\_\_\_\_

☐ Appraisal \_\_\_\_\_

☐ State tax returns years \_\_\_\_\_

☐ Public Liability Insurance \_\_\_\_\_

☐ Federal tax returns years \_\_\_\_\_

☐ Premises \_\_\_\_\_

☐ Correct SS # (Form B21) \_\_\_\_\_

☐ Vehicle(s) \_\_\_\_\_

☐ Debtor ☐ Joint debtor

☐ Licenses issued by: \_\_\_\_\_

☐ Other: \_\_\_\_\_

☐ M.T.D. to be filed by Trustee: Debtor(s): ☐ failed to appear; ☐ failed to commence payments;

☐ failed to keep payments current; ☐ does (do) not qualify as a debtor (§109); \_\_\_\_\_

☐ Other: \_\_\_\_\_

COMMENTS

  
Trustee/Presiding Officer

Date: April 30, 2010

(Rev.)